PTO/SB/81 (09-03)
Approved for use through 11/30/2005, OMB 0651-0035
U.S. Patent and Trademark Officer, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number | 10/700859 Filing Date November 04, 2003 POWER OF ATTORNEY First Named Inventor Young H. Kim Et. Al. and AQUEOUS DISPERSIONS OF POLYUREAURETHANES CORRESPONDENCE ADDRESS Title INDICATION FORM Examiner Name UNKNOWN Art Unit UNKNOWN Attorney Docket Number | CL1983USNA I hereby appoint: 23906 ✔ Practitioners at Customer Number. Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR The address associated with Customer Number: Flam or Individual Name Address Address State City Country Fax Telephone I am the: Applicant/Inventor. ~ Assignee of record of the entire interest, See 37 CFR 3.71 Statement under 37 CFR 1.73(b) is enclosed. (Form FTO/SB/96) SIGNATURE of Applicant or Assigned of Record Jiazhong Chen Neme Signature Telephone 302-695-2553 f s of record of the entire interest or their representative(s) are required. Submit multiple NOTE: Signatures of all the Inventors of a forms if more than one signature is required, see below*. forms are submitted.

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U.S. Palent and Tradamark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it dieptays a valid OMB control number. Application Number 10/700859 November 04, 2003 Filing Date **POWER OF ATTORNEY** First Named Inventor Young H. Kim Et. Al AQUEOUS DISPERSIONS OF POLYUREAURETHANES and CORRESPONDENCE ADDRESS INDICATION FORM Examiner Name UNKNOWN Art Unit UNKNOWN Attorney Docket Number CL1983USNA I hereby appoint: 23906 ✓ Prectitioners at Customer Number: Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR The address associated with Customer Number: Firm er Individual Name Address Address State Ziρ City Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Michaell O'Neill Name tichard shalls Signature 2 of Hard 2004 302 - 999 - 3988. Telephone NOTE: Signatures of all the inventors or sealgness of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. *Total of forms are submitted.

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